Effective on 12/08/2004.					Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL					cation Number	10/589,02	<u> </u>		
					Date	9/18/2007			
For FY 2009					First Named Inventor Sanyal Sarbendu		rbendu		
Applicant claims small entity status. See 37 CFR 1.27					Examiner Name Tima M		. McGuthry-Banks		
					Art Unit 1'				
TOTAL AMOUNT OF PAYMENT (\$) 1920.00					Attorney Docket 4544 - 061763				
METHOD OF PAYMENT (check all that apply)									
Check Credit Card Money Order Other (please identify):									
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name:									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee									
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17									
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.									
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
	FILING FEES SEARCH 1 Small Entity Smal				EES EXAMINATION FEES Entity Small Entity				
Application Typ	·			Fee (\$)	Fee (\$)	Fee (\$) Fees Paid (\$)		aid (\$)	
Utility	330	82	540	270	220	110			
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85	-		
Reissue	330	165	540	270	650	325			
Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEES								Small Entity	
Fee Description Feek plaim over 20 (including Reigner)								<u>Fee (\$)</u>	
Each claim over 20 (including Reissues) 52 Each independent claim over 3 (including Reissues) 220								26	
Multiple dependent c	ics)			390	110 195				
	<u>- 20 or HP</u>	Extra Cl	aims Fee	<u>: (\$)</u>	Fee Paid (\$)			pendent Claims	
7 -		=	X	=	0		Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.									
Indep. Claims	· 3 or HP	Extra Cl		<u>e (\$)</u> =	Fee Paid (\$)				
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets - 100 = Mumber of each additional 50 or fraction thereof Fee (\$) - 100 = /50 = (round up to a whole number) x =								Fee Paid (\$)	
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount)									
Other (e.g., late filing surcharge): Three Months Petition for Extension of Time, RCE								1920.00	
SUBMITTED BY									
Signature	Wal	14	L		egistration No.	22,132	Telephone 41	2-471-8815	
Name (Print/Type)									